

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | J.L. | | 4/27/10 |
| O.I.P.E. CLASSIFIER | U. | | 5/1 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | W.L. | 70303 | b-21 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final | |
| Original | |
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If more than 150 claims or 10 actions
staple additional sheet here

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